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# CMS Manual System

## Pub. 100-03 Medicare National Coverage Determinations

Department of Health &  
Human Services (DHHS)  
Centers for Medicare &  
Medicaid Services (CMS)

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Transmittal 8

Date: March 19, 2004

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CHANGE REQUEST 2988

**I. SUMMARY OF CHANGES:** Reaffirms existing Medicare noncoverage policy on Current Perception Threshold/Sensory Nerve Conduction Threshold Test (sNCT). Instructions have been updated to reflect this most recent noncoverage determination as a result of reconsideration review.

**REVISED MATERIAL - EFFECTIVE DATE:** April 1, 2004

**IMPLEMENTATION DATE:** April 1, 2004

(This revision to §160.23 of Pub. 100-03 is an NCD. NCDs are binding on all Medicare carriers, fiscal intermediaries, quality improvement organizations, health maintenance organizations, competitive medical plans, and health care prepayment plans. Under 42 CFR 422.256(b), an NCD that expands coverage is also binding on a Medicare+Choice Organizations. In addition, an administrative law judge may not review an NCD. (See §1869(f)(1)(A)(i) of the Social Security Act.)

*Disclaimer for manual changes only: The revision date and transmittal number apply only to the red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will only receive the new/revised information, and not the entire table of contents.*

## II. CHANGES IN MANUAL INSTRUCTIONS:

(R = REVISED, N = NEW, D = DELETED)

| R/N/D | CHAPTER/SECTION/SUBSECTION/TITLE   |
|-------|--|
| R     | 1/Table of Contents  |
| R     | 1/160/Nervous System   |
| R     | 1/160.23/Current Perception Threshold/Sensory Nerve Conduction Threshold Test (sNCT) |

## \*III. FUNDING:

These instructions should be implemented within your current operating budget.

## IV. ATTACHMENTS:

|   |                           |
|---|---------------------------|
| X | Business Requirements     |
| X | Manual Instruction        |
|   | Confidential Requirements |

|  |                              |
|--|------------------------------|
|  | <b>One-Time Notification</b> |
|--|------------------------------|

**\*Medicare contractors only**

# Attachment - Business Requirements

|             |                |                      |                     |
|-------------|----------------|----------------------|---------------------|
| Pub. 100-03 | Transmittal: 8 | Date: March 19, 2004 | Change Request 2988 |
|-------------|----------------|----------------------|---------------------|

**SUBJECT: NCD: Current Perception Threshold/Sensory Nerve Conduction Threshold Test (sNCT)**

## I. GENERAL INFORMATION

**A. Background:** This revision to §160.23 of Pub. 100-03 is an NCD. The NCDs are binding on all Medicare carriers, fiscal intermediaries, quality improvement organizations, health maintenance organizations, competitive medical plans, and health care prepayment plans. Under 42 CFR 422.256(b), an NCD that expands coverage is also binding on a Medicare+Choice Organizations. In addition, an administrative law judge may not review an NCD. (See §1869(f)(1)(A)(i) of the Social Security Act.

**B. Policy:** Effective April 1, 2004, this instruction reaffirms existing Medicare noncoverage policy on Current Perception Threshold/Sensory Nerve Conduction Threshold Tests (sNCTs). Instructions have been updated to reflect this most recent noncoverage determination as a result of reconsideration review.

**C. Provider Education:** A provider education article related to this instruction will be available at [www.cms.hhs.gov/medlearn/matters](http://www.cms.hhs.gov/medlearn/matters) shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin.

## II. BUSINESS REQUIREMENTS

*"Shall" denotes a mandatory requirement*

*"Should" denotes an optional requirement*

| Requirement # | Requirements   | Responsibility           |
|---------------|--|--------------------------|
| 2988.1        | Effective April 1, 2004, Medicare contractors shall note that, based on a reconsideration of current Medicare policy for Current Perception Threshold/Sensory Nerve Conduction Threshold Test (sNCT), CMS reaffirms its original national noncoverage policy for sNCT. | All Medicare Contractors |
| 2988.2        | Effective April 1, 2004, Medicare contractors shall note that, all other uses of sNCT not otherwise specified in §160.23 of Pub. 100-03 of the NCD Manual remain noncovered.   | All Medicare Contractors |

### **III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS**

#### **A. Other Instructions: N/A**

| <b>X-Ref Requirement #</b> | <b>Instructions</b> |
|----------------------------|---------------------|
|                            |                     |

#### **B. Design Considerations: N/A**

| <b>X-Ref Requirement #</b> | <b>Recommendation for Medicare System Requirements</b> |
|----------------------------|--|
|                            |  |

#### **C. Interfaces: N/A**

#### **D. Contractor Financial Reporting /Workload Impact: N/A**

#### **E. Dependencies: N/A**

#### **F. Testing Considerations: N/A**

### **IV. SCHEDULE, CONTACTS, AND FUNDING**

|  |  |
|--|--|
| <b>Effective Date: April 1, 2004</b><br><b>Implementation Date: April 1, 2004</b><br><b>Pre-Implementation Contact(s): Lorrie Ballantine, 410-786-7543</b><br><b>Post-Implementation Contact(s): Lorrie Ballantine, 410-786-7543</b> | <b>These instructions shall be implemented within your current operating budget.</b> |
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# Medicare National Coverage Determinations Manual

## Chapter 1 - Coverage Determinations

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### Table of Contents

*(Rev 8, 03-19-04)*

#### *160 - Nervous System*

##### *160.23 - Current Perception Threshold/Sensory Nerve Conduction Threshold Test (sNCT)*

## **160 - Nervous System**

**(Rev 8, 03-19-04)**

### **160.23 - Current Perception Threshold/Sensory Nerve Conduction Threshold Test (sNCT) - (Effective April 1, 2004)**

**(Rev 8, 03-19-04)**

*sNCT is a psychophysical assessment of both central and peripheral nerve functions. It measures the detection threshold of accurately calibrated sensory stimuli. This procedure is intended to evaluate and quantify function in both large and small caliber fibers for the purpose of detecting neurologic disease. Sensory perception and threshold detection are dependent on the integrity of both the peripheral sensory apparatus and peripheral-central sensory pathways. In theory, an abnormality detected by this procedure may signal dysfunction anywhere in the sensory pathway from the receptors, the sensory tracts, the primary sensory cortex, to the association cortex.*

*This procedure is different and distinct from assessment of nerve conduction velocity, amplitude and latency. It is also different from short-latency somatosensory evoked potentials. Codes designated for eliciting nerve conduction velocity, latency or amplitude, and those designed for short latency evoked potentials are not to be used for sNCT. The sNCT has a unique code.*

*Effective October 1, 2002, CMS initially concluded that there was insufficient scientific or clinical evidence to consider the sNCT test and the device used in performing this test reasonable and necessary within the meaning of section 1862(a)(1)(A) of the law. Therefore, sNCT was noncovered.*

*Based on a reconsideration of current Medicare policy for sNCT, CMS concludes that there continues to be insufficient scientific or clinical evidence to consider the sNCT test and the device used in performing this test as reasonable and necessary within the meaning of section 1862(a)(1)(A) of the law.*

#### **A. Nationally Covered Indications**

*Not applicable.*

#### **B. Nationally Noncovered Indications**

- 1. CMS reaffirms its original noncoverage determination for sNCT.*
- 2. All other uses of sNCT not otherwise specified remain noncovered.*

*(This NCD last reviewed March 2004.)*